## IN THE U TED STATES PATENT AND TRADEMAR FICE

Inventor(s): Appln. No.:

F. Abel Ponce De Leon et al.

09

341,105

Series Code ↑

Serial No. 个

Filed: September 7, 1999 Hon. Commissioner of Patents Washington, D.C. 20231

Group Art Unit

1634

SEP 1 2

Examiner: Atty. Dkt.

B. Sisson

0275805

TECH CENTER 1600/2900

Client Ref M#

Antiviral Composition Derived From Appln. Title:

Allium Cepa and Therapeutic Use

Thereof

Sir:

## REPLY/AMENDMENT/LETTER

Date:

September 9, 2002

This is a reply/amendment/letter in the above-identified application and includes the herewith attachment of same date and subject which is incorporated hereinto by reference and the signature below is treated as the signature to the attachment in absence of a signature thereto.

## FEE REQUIREMENTS FOR CLAIMS AS AMENDED

| 1. Small Entity claim   |  |                                    |     |                        |                    |               |                                |                    |
|---|--|------------------------------------|-----|------------------------|--------------------|---------------|--------------------------------|--------------------|
| A. ☐ NOT made B. ☐ Withdrawn C. ☐ made herewith D. ☒ made previously  For B & C See Required Separate Paper (Pat-256)   | Claims<br>remaining after<br>amendment | Highest number previously paid for |     | Present Extra          | Large/Small Entity |               | Additional<br>Fee              | Fee Code<br>Lg/Sm  |
|   |  |                                    |     |                        |                    |               |                                |                    |
| 2. Total Effective Claims   | 1                                      | **minus                            | 20  | 0                      | x \$18/\$9         | =             | + \$0                          | 103/203            |
| 3. Independent Claims   | 1                                      | ***minus                           | 3   | 0                      | x \$84/\$42 =      |               | + \$0                          | 102/202            |
| 4. If amendment enters <u>proper</u> multiple dependent claim(s) into this application for <u>first</u> time (leave <u>blank</u> if this is a <u>reissue</u> application)   |  |                                    |     |                        |                    |               | + \$0                          | 104/204            |
| 5. Original due Date: June 9, 2002 NONE   |  |                                    |     |                        |                    |               |                                |                    |
| 6. Petition is hereby made to extend the original due (1 mo) \$110/\$55 =   |  |                                    |     |                        |                    |               |                                | 115/215            |
| date to cover the date this response is filed for which the (2 mos)   \$400/\$200 =   |  |                                    |     |                        | + \$460            |               |                                | 116/216            |
| requisite fee is attached (3 mos)   \$920/\$460 =   |  |                                    |     |                        |                    |               |                                | 117/217<br>118/218 |
| (4 mos)   \$1,440/\$720=  |  |                                    |     |                        |                    |               | The state of                   | 128/228            |
| (5 mos) \$1,960/\$980=  |  |                                    |     |                        |                    |               |                                | 120/220            |
| 7. Enter any previous extension fee paid since above original due date and subtract - \$0   |  |                                    |     |                        |                    |               | + \$460                        |                    |
| 8.  |  |                                    |     |                        |                    | Extension Fee |                                | 1 1 1              |
| 9. If <u>Terminal Disclaimer</u> attached, <u>add</u> Rule 20(d) official fee   |  |                                    |     |                        |                    | + \$110/\$55  |                                | 148/248            |
| 10. If IDS attached requires Official Fee under Rule 97 (c),  |  |                                    |     |                        |                    | + \$180       |                                | 126                |
| or if Rule 97(d) Request add   + \$180  |  |                                    |     |                        |                    |               | + \$0                          | 126                |
| 11. After-Final Request Fee per rules 129(a) and 17(r)  |  |                                    |     |                        | + \$740/370        |               | + \$0                          | 146/246            |
| 12. No. of additional inventions for examination per Rule 129(b)  |  |                                    |     |                        | x \$740/370 ea     |               | + \$0                          | 149/249            |
| 13. Request for Continued Examination (RCE)   |  |                                    |     |                        | + \$740/370        |               | + \$0                          | 1179/1279          |
| 14. Petition fee for  |  |                                    |     |                        |                    |               | + \$0                          |                    |
| 15. TOTAL FEE =   |  |                                    |     |                        |                    |               | \$460                          |                    |
| <ul> <li>16. *If the entry in this space is less than entry in next space, the "Present Extra" result is "0".</li> <li>17. **If the "Highest number previously paid for" in this space is less than 20, write "20" in this space.</li> <li>18. ***If the "Highest number previously paid for" in this space is less than 3, write "3" in this space.</li> </ul> |  |                                    |     |                        |                    |               | PLEASE CHARGE<br>OUR DEP. ACCT |                    |
| 10/2002 TBESHAH1 00000025 09341105 Our Deposit Account No   |  |                                    |     |                        |                    |               | _                              |                    |
| FC:217 460.00 CH  |  |                                    | (Ou | r Order No. <u>015</u> | 5837<br>C#         | 027580<br>M#  |                                |                    |

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CHARGE STATEMENT: The Commissioner is hereby authorized to charge any fee specifically authorized hereafter, or any missing or insufficient fee(s) filed, or asserted to be filed, or which should have been filed herewith or concerning any paper filed hereafter, and which may be required under Rules 16-18 (missing or insufficiencies only) now or hereafter relative to this application and the resulting Official Document under Rule 20, or credit any overpayment, to our Accounting/Order Nos. shown above, for which purpose a duplicate copy of this sheet is attached.

This CHARGE STATEMENT does not authorize charge of the issue fee until/unless an issue fee transmittal sheet is filed.

Query: Is appeal deadline now? If so, file Notice of Appeals separately.

35,030

Pillsbury Winthrop LLP Intellectual Property Group

P.O. Box 10500 McLean, VA 22102

Tel: (703) 905-2000

By Atty: Robin L. Teskin

Reg. No. Fax:

(703) 905-2500

Sig:

Tel:

(703) 905-2200

Atty/Sec: RLT/af

NOTE: File this cover sheet in duplicate with PTO receipt (PAT-103A) and attachments

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